

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

500 5/25/05

REQUEST FOR PATENT FEE REFUND

1 Date of Request: 3/28/05

2 Serial/Patent # 10/523910

3 Please refund the following fee(s):

	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input checked="" type="checkbox"/> Filing Fee Change			\$ 100.00
Amendment			\$
Extension of Time			\$
Notice of Appeal/Appeal			\$
Petition			\$
Issue			\$
Cert of Correction/Terminal Disc.			\$
Maintenance			\$
Assignment			\$
Other			\$

7 TOTAL AMOUNT OF REFUND

\$ 100.00

8 TO BE REFUNDED BY: CC

Treasury Check

Credit Deposit A/C #:

, 13 -- 3080

10 REASON:

Overpayment

Duplicate Payment

No Fee Due (Explanation):

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME: Rita White

TITLE: Legal Assistant Examiner

SIGNATURE: Rita White

PHONE: 7308-9140 ext. 231

OFFICE: DO/EO

***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****

APPROVED: _____ DATE: _____

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B